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William Hall	(Depositor's name
Mellen DA	(Signature
April 27, 2007	(Date

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/682,292	10/09/2003	Scott Wofford	41650.2	9344
TITLE OF INVENTION:				•

METHODS FOR TREATING VICTIMS OF CEREBROVASCULAR DISEASE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	YES	\$700	\$0	\$0	\$700.00	06/06/2007	
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
Alter, Alyssa I	M.	3762	607-048000				
CFR 1.363). Change of corresp Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-(Number is required. 3. ASSIGNEE NAME A	ication (or "Fee Address)2 or more recent) attack	nge of Correspondence Indication form ed. Use of a Customer	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type)				
recordation as set fort (A) NAME OF ASSI Stroke Play Lt	GNEE	eletion of this form is NO	data will appear on the part a substitute for filing an art (B) RESIDENCE: (CITY Abilene, Texas	=		unent has been fried for	
Please check the appropr	iate assignee category or	categories (will not be pr	inted on the patent):	Individual 🛛 Corporat	ion or other private group	entity Government	
	are submitted: No small entity discount # of Copies	permitted)	4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☑ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☑ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 500449 (enclose an extra copy of this form).				
**	s SMALL ENTITY state	15, See 37 CFR 1.27.	b. Applicant is no long	ger claiming SMALL EN	TITY status. See 37 CFR	1.27(g)(2).	
Authorized Signature	Melle	Gired will not be accepted by Patent and Projectionary	d from anyone other than to	Date April 27, 20		assignee or other party in	
Typed or printed nam	e William D. Hall			Registration No. 3	5,535		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.							

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PTO/SB/21 (04-07) Approved for use through 09/30/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
≥aperwork Reduction Act of 1995. no persons are required to respond to a collection of information unless it displays a valid OMB control number. **Application Number** 10/682,292 TRANSMITTAL Filing Date October 9, 2003 **FORM** First Named Inventor Scott Wofford Art Unit 3762 **Examiner Name** Alyssa M. Alter (to be used for all correspondence after initial filing) Attorney Docket Number Total Number of Pages in This Submission 41650.2 **ENCLOSURES** (Check all that apply) After Allowance Communication to TC Х Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a **Proprietary Information** After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request below): Request for Refund **Express Abandonment Request** PTOL 85; and Return Postcard CD, Number of CD(s) _ Information Disclosure Statement Landscape Table on CD **Certified Copy of Priority** Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name McAfee & Tal

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	CERTIFICATE OF	TRANSMISSION/I	MAILING				
sufficient postage as first of the date shown below:	rrespondence is being facsimile transr class mail in an envelope addressed to						
Signature Typed or printed name	William D. Hall	H//	Date	April 27, 2007			

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William D. Hall

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7 000 paradam to the Sensonation Appropriations Fig. 2000 (11.11. 4010).			3). A	Application Number 10/682,292			
I FEE TRANSMITTAL I		_	iling Date		October 9, 2003		
For FY 2007		F	irst Named Inve	entor	Scott Wofford		
Applicant claims amall and	ibe atatus	- Con 27 CER 1 27	- E	xaminer Name		Alyssa M. Alter	
	Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3762						
TOTAL AMOUNT OF PAYME	VT (\$) 700.00	Α	ttorney Docket	No.	41650.2	
METHOD OF PAYMENT (heck al	l that apply)					
x Check Credit Car	ı 🔲	Money Order	Vone	Other (pl	lease identi	fy):	
X Deposit Account Depo	sit Accou	nt Number: 500449		Deposit Acc	count Name	McAfee & Tat	ft
For the above-identified	deposit	account, the Director is	hereby	authorized to:	(check all	that apply)	
Charge fee(s) inc	icated b	elow		Charge	e fee(s) in	dicated below, exc	cept for the filing fee
		e(s) or underpayments o	of fee(s) x Credit	any overp	ayments	
under 37 CFR 1. لـــَــا WARNING: Information on this for information and authorization on	m may b	ecome public. Credit card	d Inform	nation should no	ot be Includ	ed on this form. Pr	rovide credit card
FEE CALCULATION							
1. BASIC FILING, SEARCI							
	FILING	FEES SE Small Entity		H FEES Small Entity	EXAMI	NATION FEES Small Entity	
	ee (\$)		<u>e (\$)</u> =	Fee (\$)	Fee (\$		Fees Paid (\$)
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2. EXCESS CLAIM FEES Fee Description						Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (incl						50	25
Each independent claim		(including Reissues)				200	100 180
Multiple dependent clair Total Claims Example 1	us tra Clai	ms Fee (\$)	Fee Pa	aid (\$)		360 Multiple De	ependent Claims
- 20 or HP =		×= .				Fee (\$)	Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20.							
3 or HP = x =							
HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50							
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							
					\$700.00		
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Signature

Name (Print/Type)

William D. I/all

Registration No. (Attorney/Agent)

Signature

Oate April 27, 2007

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.